

River City Quilters' Guild **Membership Form** PO Box 15816

Guild address, ATTN Membership (address is at the top of this form).

Admin Use Only: Roster Updated: ___

Sacramento, CA 95852

2024

PLEASE PRINT

Admin Use Only/	
CASH / CHECK Check # N Regular: C	Amounts Abrshp: Wwsltr: Other: Cotal:

City						
	StateZip					
110HIC 1 HOHC	Cell P.					
B-Day (mo/day)	Is you	ır membersl	hip (please check	k one)? New:	Current:	Returning:
Legacy	Member (See requirements belo	ow): N	Membership # (l	f current or return	ning):	_
What is your preference f	or Newsletter delivery: PDF	U.S. N	Mail (\$1	0.00 annual charg	ge for U.S. Mail)	
Do you want ALL of you	r information published in the m	nembership 1	roster? Yes	No		
What information do you	want left out?					
What is your preference f	or receiving the membership ros	ster: Electro	onic (PDF forma	t) Printe	d Copy	
are needed each year for t	th a wide variety of activities, exche following activities. Please or more people can serve as Commentors Neighborhood Circles New Member Meet & Greet Newsletter Parliamentarian Program Publicity Quilt Show	ircle the cor mmittee Co Quilters Ti Retreat Co	nmittee or comr -Chairs together reasures ordinator ow S Challenge	nittees you would	d consider chairing	
Do you have a sewing or you would share or teach	quilting skill or technique that at a mini workshop?	Yes	No			
	uilting at a Guild community entor Night, etc.)	Yes	No			
Would you demonstrate qoutreach appearance? (M	8 4, 444,					
	-	Yes	No			

You may bring your membership form to the monthly meeting, or mail the form and a check (payable to RCQG) to the River City Quilters'

_____ Membership Card: _____